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PTO/SB/21 (6-99)

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<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="margin: 0;">(to be used for all correspondence after initial filing)</p>		Application Number	09/998,041			
		Filing Date	November 15, 2001			
		First Named Inventor	Audrey Goddard			
		Group/Art Unit	1647			
		Examiner Name	Sandra Wegert			
Total Number of Pages in This Submission	60	Attorney Docket Number	39780-2730 P1C34			
ENCLOSURES (check all that apply)						
<table border="0" style="width: 100%;"> <tr> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <div style="margin-left: 20px;"> <input type="checkbox"/> After Final <input type="checkbox"/> Version With Markings Showing Changes <input type="checkbox"/> Declaration/Affidavits </div> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Copy of Notice </div> </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> Amendment under CFR §1.48 (b) and 1.312 <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund </td> <td style="width: 33%; vertical-align: top;"> <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> ADDITIONAL ENCLOSURE(S) (PLEASE IDENTIFY BELOW): <input checked="" type="checkbox"/> Evidence Appendix Items 1-5. </td> </tr> </table>				<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <div style="margin-left: 20px;"> <input type="checkbox"/> After Final <input type="checkbox"/> Version With Markings Showing Changes <input type="checkbox"/> Declaration/Affidavits </div> <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <div style="margin-left: 20px;"> <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 <input type="checkbox"/> Copy of Notice </div>	<input type="checkbox"/> Amendment under CFR §1.48 (b) and 1.312 <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, by Assignee to Exclusion of Inventor Under 37 C.F.R. §3.71 With Revocation of Prior Powers <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> ADDITIONAL ENCLOSURE(S) (PLEASE IDENTIFY BELOW): <input checked="" type="checkbox"/> Evidence Appendix Items 1-5.
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SIGNATURE OF APPLICANT, ATTORNEY OR AGENT						
Firm or Individual name	<div style="display: flex; justify-content: space-between;"> <div>HELLER EHRMAN LLP 275 Middlefield Road, Menlo Park, California 94025</div> <div>GINGER R. DREGER (REG. NO. 33,055) Telephone: (650) 324-7000 Facsimile: (650) 324-0638</div> </div>					
Signature						
Date	MAY 2, 2007	Customer Number:	35489			
Filed Via EFS Date Filed: MAY 2, 2007 <div style="float: right;">Filed By: L. LAZO</div>						

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